

Name of Project

2012

Safe Routes to School Application & I-STOP 4 Kids Worksheets



Main Contact:

Name

Organization

Title

Phone

Email

Idaho

Safe Routes to School

Contact Information

Complete the information below and provide as the first page of your proposal. Carefully read and refer to the “**I-STOP 4 Kids Guidelines**” as you complete this document. The person identified as the “Primary Contact Person” will be the main point of contact and must be able to answer questions regarding the application. For assistance in completing this document, please contact the Idaho Safe Routes to School Coordinator (contact information below).

Title of Proposed Project (use same as name from SR2S Travel Plan):

Applicant (name of organization): _____

Federal Employment Identification Number (EIN): _____

Sponsor Type: ☐ School District ☐ City ☐ County ☐ State ☐ Other

Sponsoring Public Authority (Contracting Agent): _____

Primary Contact Person (someone who can answer application questions):

_____ Title: _____

Mailing Address: _____

City/State/Zip: _____

Daytime Phone: _____ Fax: _____

Email: _____

School District: _____

School Name (Copy and attach additional Contact Pages for multiple schools):

Secondary Contact Person: _____ Title: _____

Daytime Phone: _____ Fax: _____

Email: _____

ITD District (check one)

- Is project(s) located in a Metropolitan Planning Organization’s jurisdiction?
☐ Yes ☐ No
- Will you be submitting more than one project during this application cycle?
☐ Yes ☐ No
- This program is a cost reimbursement program. Do you have funds in place to support spending, prior to reimbursement by ITD, should your project get funding?

☐ Yes ☐ No

- The accompanying **I-STOP** is for both infrastructure and non-infrastructure funding. If your infrastructure project is NOT recommended for funding in this federal fiscal year, do you want your non-infrastructure project to be considered as a stand-alone plan?

☐ Yes ☐ No

Anticipated Funding Amount Requested for this K-8 project(s)

Project Type Infrastructure – Amount Requested \$ _____

Project Type Non-Infrastructure (education component) – Amount Requested \$ _____

Total Requested \$ _____

Previously Funded Year(s) _____

Project Sponsor

I, _____ (print your name), am the authorizing official for
(name of organization) _____

and certify that the above named sponsoring agency supports the proposed Safe Routes to School project and has the legal authority to apply for and pledge the funds required to receive reimbursement for this project and shall enter into a state/local agreement with ITD. I further certify that all information contained herein is true and correct to the best of my knowledge and that the sponsor will provide maintenance for all infrastructure improvements upon completion.

Person Submitting Proposal:

Signature

Title

Date _____

ITD District _____

Please deliver one (1) original and fifteen (15) copies to:

Jo O'Connor
Safe Routes to School Coordinator
Idaho Transportation Department.
Annex Building
3293 Jordan Street
Boise, ID 83703

joconnor@itd.idaho.gov
208-334-4475 (phone)
208-334-8595 (fax)

I-STOP 4 Kids Travel Plan Work Sheet

SECTION 1: Introduction and Start of the I-STOP Travel Plan

(YOUR SCHOOL SR2S TASK FORCE must be committed to ensuring that students living within biking and walking distance are able to utilize active transportation alternatives, such as walking and bicycling, for a safe and enjoyable trip to school. This I-STOP will address the issues that impede active transportation, and seek Safe Routes to School (SR2S) strategies to solve the problems identified.

Our Task Force is motivated to pursue Safe Routes to School because (check each that applies):

- ☐ We highly value student physical activity and health.
- ☐ We have a history of pedestrian or bicycle crashes around school(s).
- ☐ We wish to improve unsafe or insufficient walkways, bikeways, and crossings.
- ☐ We are committed to reducing speeding and reckless driving near school(s).
- ☐ Our students are threatened by illegal behaviors near school(s).
- ☐ We want to improve the air quality and reduce fuel consumption around our school(s).
- ☐ We want to build better partnerships between school(s) and the community.
- ☐ Other _____

SECTION 2: I-STOP School Based Task Force

A diverse Safe Routes to School Task Force develops the most successful programs and are involved in the day-to-day implementation of the program at each school. Identify at least two individuals for each school's SR2S Task Force, maximum points will be given for a comprehensive list of members and identify their role e.g. Walking School Bus supervisor. These individual may also be part of the *Project Partners* list in *Section 10* of this document. The Task Force is usually comprised of a variety of individuals each lending their own unique perspective and expertise in order to make walking and bicycling to school safer, more routine and fun for our students. **The Task Force should include:** School staff and/or Principal, School District officials, student, parent, PTA/PTO or School Council members. Refer to the Guidelines for Task Force building suggestions; add extra pages of Task Force information for additional schools.

School Name _____

Chair or Co-chair: _____
Title: _____
Representing: _____
Role: _____
Signature: _____ Date: _____

Chair or Co-chair: _____
Title: _____
Representing: _____
Role: _____
Signature: _____ Date: _____

Member: _____
Title: _____
Representing: _____
Role: _____
Signature: _____ Date: _____

Member: _____
Title: _____
Representing: _____
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Member: _____
Title: _____
Representing: _____
Role: _____
Signature: _____ Date: _____

Member: _____
Title: _____
Representing: _____
Role: _____
Signature: _____ Date: _____

SECTION 3: The Public Input Process

Our Task Force worked to include the entire community in developing our **I-STOP**. Refer to pages 10-12 of the Guidelines for information about each of these processes. The following were accomplished (check each that applies):

- | | |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> Administered parent surveys | <input type="checkbox"/> Incorporated our School Wellness Policy objectives |
| <input type="checkbox"/> Interviewed key stakeholders | <input type="checkbox"/> Conducted engineering studies |
| <input type="checkbox"/> Hosted public meetings | |
| <input type="checkbox"/> Solicited student opinions | <input type="checkbox"/> Publicized a public comment period |
| <input type="checkbox"/> Conducted a school neighborhood “Walkability and Bikeability” assessment | |
| <input type="checkbox"/> Consulted with MPO | <input type="checkbox"/> Consulted with School District |
| <input type="checkbox"/> Consulted with Highway District | <input type="checkbox"/> Consulted with ITD District |
| <input type="checkbox"/> Incorporated our town’s existing bike or pedestrian plan recommendations | |
| <input type="checkbox"/> Existing policies or plans support community wide bicycle and pedestrian facilities | |
| <input type="checkbox"/> Community based bicycle or pedestrian advocates are involved in the project | |
| <input type="checkbox"/> We have no public input process at this time | |
| <input type="checkbox"/> Other _____ | |

Some highlights of our public input activities included:

Provide details of existing policies or plans that support community wide improvements for bicycle and pedestrian facilities:

SECTION 4: Current School Travel Environment

This is how our students currently travel to and from school. For projects that have been funded in the past state your baseline data. Provide data for each participating school on a separate page in this format. Also indicate how the information was gathered (e.g. in class hands-up count or self-reporting, school data, surveys sent home etc.) Refer to page 12 of the Guidelines to complete this section.

SCHOOL NAME: _____

SURVEY METHOD: _____

Baseline Travel Modes M/Y _____	Walk	Bike	School Bus	Safety Bus	Carpool	Family Vehicle	Other
Number of Students							
Percentage of Students							

Current Travel Modes M/Y _____	Walk	Bike	School Bus	Safety Bus	Carpool	Family Vehicle	Other
Number of Students							
Percentage of Students							

These are the distances our students live from school:

Distance Live From School	0 - 1/2 mile	1/2 - 1 mile	1 - 1 1/2 miles	1 1/2 – 2 miles	Over 2 miles
Number of Students					
Percentage of Students					

If funded, state your SR2S project goals:

Travel Mode Goals M/Y _____	Walk	Bike	School Bus	Safety Bus	Carpool	Family Vehicle	Other
Number of Students							
Percentage of Students							

School Demographics: Total students in this school # _____

Students on free or reduced lunch % _____

We have the following supports or activities in place during student travel times (check each that applies):

- | | |
|--------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Crossing guards | <input type="checkbox"/> Staff presence during drop-off/pick-up |
| <input type="checkbox"/> Speed zones | <input type="checkbox"/> Walking School Bus |
| <input type="checkbox"/> Crosswalks | <input type="checkbox"/> Bike Train |
| <input type="checkbox"/> Advance warning signs | <input type="checkbox"/> Police department support |
| <input type="checkbox"/> Traffic calming devices | <input type="checkbox"/> Crime or violence prevention program |
| <input type="checkbox"/> Student patrol | <input type="checkbox"/> Neighborhood Watch program |
| <input type="checkbox"/> Parent patrol | <input type="checkbox"/> Existing designated school route plan/map |
| <input type="checkbox"/> Other _____ | |

Our school has the following Health and Wellness policies in place over and above state minimum standards (check all that apply):

- | | |
|------------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> Soda and candy is removed from vending | <input type="checkbox"/> Nutritious snacks are offered to our students |
| <input type="checkbox"/> Member of Idaho School Nutrition Assn. | <input type="checkbox"/> Idaho Nutrition Standards for Schools |
| <input type="checkbox"/> Idaho Physical Activity and Nutrition Program | <input type="checkbox"/> Idaho Coordinated School Health |
| <input type="checkbox"/> Other _____ | |

SECTION 5: School Arrival/ Dismissal Procedures and existing Policies (provide details of existing policies and planned changes)

For Pedestrian and Bicyclist:

For Private Vehicles and School Buses:

How do you believe this project will help reduce motor vehicle congestion and emissions in the vicinity of the school, or change parent and school bus pick-up/drop-off procedures?

SECTION 6: Current Barriers to Active Transportation

We have identified and prioritized the following barriers to walking and bicycling to school (rate the importance of each that applies, as 'High-H', 'Medium-M' or 'Low-L'): For a summary of the types of barriers, refer to pages 13-15 of the Guidelines.

H M L

- | | | | |
|--------------------------|--------------------------|--------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Convenience of Parents |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Child Care provides transportation to and from school |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Traffic crashes within 2 miles of school over the last 3 years |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Missing or insufficient walkways (sidewalks and paths) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No safe place to ride a bike to school |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Crossing streets and intersections is difficult or dangerous |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A primary arterial or highway divides the school from residential areas |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Walkways are not accessible to students with disabilities |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Distance to school is too far |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bike parking at school is missing, insufficient or non-secure |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Dangerous driving and speeding on streets |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Drop-off and pick-up process creates congestion and unsafe behaviors |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Public safety concerns (crime, violence) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | School policies ban or prohibit bicycling |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Local ordinances negatively impact pedestrians and bicyclists |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Other _____ |

The following are some details regarding the barriers that we have identified as our top priorities. It includes locations and characteristics of specific situations:

SECTION 7: Creating Non-Infrastructure Solutions

Refer to pages 15-16 of the Guidelines for details on the strategies in this section.

Goals

Our primary goal(s) for active school transportation are (check each that applies):

- ☐ Increase the number of students walking and bicycling to school
- ☐ Improve the safety of walking and bicycling students
- ☐ Other _____

Strategies

We have identified strategies involving four of the 5 “E’s” of Safe Routes to School to address the non-infrastructure barriers to walking and bicycling in our school community and to achieve our stated goals. We have selected all applicable strategies from each of the categories of Education, Encouragement, Enforcement and Evaluation, in addition to any Engineering strategies that are indicated. The strategies we will use include:

a) Education Strategies (check all that apply)

- ☐ Create educational materials
- ☐ Teach pedestrian and bicycle safety skills to students and parents
- ☐ Organize a Bicycle Rodeo or training course to teach on-bike skills and bike maintenance
- ☐ Teach personal safety skills to students and parents
- ☐ Teach the health, environmental and sustainable transportation benefits of walking and bicycling to students and parents
- ☐ Educate parents and caregivers about safe driving procedures at the school
- ☐ Train school and community audiences about Safe Routes to School
- ☐ Create preferred walking and biking route maps
- ☐ Other _____

b) Encouragement Strategies (check all that apply)

- ☐ Create a “Corner Captain” volunteer program (adult volunteers along route to school)
- ☐ Create Recommended Routes, Safe Houses and Safe Businesses on the route to school
- ☐ Start a Walking School Bus program
- ☐ Start a Bike Train program
- ☐ Host International Walk to School Day or other special event (first Wednesday of October each year)
- ☐ Initiate a walking/biking mileage club or other contest
- ☐ Create a park-and-walk program
- ☐ Promote Safe Routes to School in the community
- ☐ Initiate an incentive program for safe travel behaviors among students

- ☐ Start a Neighborhood Watch initiative
- ☐ Conduct a community safe driving awareness and education campaign (must get prior authorization from SR2S for all media funded by ITD)
- ☐ Other _____

c) Enforcement Support Strategies (check all that apply, law enforcement overtime or equipment is not funded by Idaho SR2S)

- ☐ Create a crossing guard training program
- ☐ Create a parent or student patrol program
- ☐ Provide regular presence during school arrival and dismissal
- ☐ Utilize speed feedback trailers or signs
- ☐ Conduct increased warning and ticketing efforts that target motorists (e.g. crosswalk enforcement)
- ☐ Assist with bicycle and pedestrian safety education activities and special events
- ☐ Other _____

d) Evaluation Strategies (check all that apply)

To gauge the success of our efforts, we will collect data both before and after implementation of our strategies. We will measure the impact of our **I-STOP** Travel Plan by (check at least one):

- ☐ Counting the number of students who walk and bicycle to and from school
- ☐ Conducting the National Center for SR2S Student Tally paper surveys or on-line surveys
- ☐ Tracking the number of crashes within 2 mile radius of school
- ☐ Conducting the National Center for SR2S parent/guardian perceptions of safety surveys or on-line surveys
- ☐ Obtaining planning services for expanding or improving an existing SR2S Travel Plan
- ☐ We have developed additional safety evaluation measures that include: (fill in below)

If funded we will record our measurements in the following table:

Method of Evaluation	"Before" - Measure and Data Collection
Collect Student Tally (Required during the first 4 weeks of school)	Date: _____ Percentage Walking: _____ Percentage Biking: _____
Distribute Parent Surveys (Required during the first 4 weeks of school)	Date: _____
Count number of walking/bicycling students (on-going)	Date: _____ Number Walking: _____ Number Biking: _____
Track number or crashes	Time Period: _____ Number of Crashes: _____
Your method	Date: _____ Your measurement: _____

SECTION 8: Mapping School Attendance Area, Preferred Routes and Proposed Improvements/Targeted Location(s)

Provide a map which depicts the school's travel routes, attendance boundaries, existing infrastructure and proposed improvements within a 2 mile radius (or what your school considers appropriate walking and biking distance). Map size shall be no bigger than 8 ½"X11". Color photos are also permitted (limited to 2 - 8 ½" X 11" pages). Attach map and photos before Section 9.

Note: We recommend providing color photos and maps for all application copies. It is much easier for reviewers to see what is being portrayed. Maximum points will be awarded for this section if the preferred walking and biking route maps are created for each school and provided with the application.

Your map should include the following:

- School location
- Surrounding streets and street names
- Location of sidewalks and pathways within walking or bicycling distance
- Landmarks
- Traffic signals, stop signs and yield signs
- Crosswalk and crossing guard locations
- Speed limits
- Designated walking or bicycling routes, if they exist.
- Specific areas to avoid or where extra caution is needed such as railroad tracks, four lane roads, drainage ditches, poorly maintained roads or sidewalks, driveways with heavy truck traffic, etc.

Sometimes this information is available from the school district or local planning or traffic engineering department. In some cases it may be necessary to gather more information through a walkabout, bicycle about, audit or other assessment method. For more information on conducting walking and bicycling audits, please visit www.saferoutesinfo.org/guide/engineering/walking_and_bicycling_audits.cfm

SECTION 9: A Plan for Action (Do not exceed one additional page for this section)

The Safe Routes to School Team is committed to realizing our vision for a safe, enjoyable and accessible walking and bicycling environment for our students. We will utilize the following Action Plan to keep our efforts focused and on track:

NOTE: List SR2S strategies you identified in Section 7 in the table below and on the following page. Complete the remaining columns. (see sample in Guidelines.)

Issue	Strategy Description	Education	Encouragement	Enforcement	Engineering	Evaluation	Task	Time	Responsible Party	Status	Potential Funding Source

CHOICES INCLUDE:

Timeframe Selections: 3-6 months, 6-12 months, 12-24 months, or 24-36 months

Status Selections: not yet begun, under development, being implemented, complete

Funding Source Selections: Idaho SR2S Program - current program cycle, Idaho SR2S Program - future program cycle, other funding source (identify the source), and none needed local

Issue	Strategy Description	Education	Encouragement	Enforcement	Engineering	Evaluation	Task	Time	Responsible Party	Status	Potential Funding Source

SECTION 10: Project Partners Endorsement and Approval of I-STOP

We believe that building a strong partnership between schools and local government is fundamental to the success of SR2S project. Project Partners are individuals within agencies or organizations that have a vested interest in your school project because of jurisdiction. You must have the required support of each official in this section. Please indicate whether partners have an active *Role in the Task Force*. Our Travel Plan has been endorsed by the following representatives:

REQUIRED: SCHOOL OFFICIAL

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

REQUIRED: SCHOOL DISTRICT OFFICIAL

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

REQUIRED (if applying for Infrastructure project on IDT Right-of-Way): ITD DISTRICT ENGINEER

Name: _____

Title: _____

District: _____

Task Force Role: _____

Signature: _____ Date: _____

REQUIRED (if applying for Infrastructure funding): LOCAL GOVERNMENT OFFICIAL (entity with jurisdiction over the project's location)

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

REQUIRED: METROPOLITAN PLANNING ORGANIZATION OFFICIAL

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

OPTIONAL: PARENT ORGANIZATION (PTA, PTO or Local School Council)

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

OPTIONAL: HEALTH ORGANIZATION (local public health agency, hospital, county Health Department, nonprofit, etc.)

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

OPTIONAL: Other

Name: _____

Title: _____

Representing: _____

Task Force Role: _____

Signature: _____ Date: _____

SECTION 11: Non-Infrastructure Funding Request (Including Coordinator Positions)

Cost Estimate for Non-Infrastructure Efforts: Local funds and in-kind donations are encouraged, but not required.

All revisions, purchasing requests, or other expenditures over \$50.00 must be submitted to State SR2S Coordinator on the Budget Itemization ITD Form 0191 for prior approval. All requests for reimbursement must be submitted on the ITD Form 0188 Reimbursement Claim, with invoices and proof of payment. **When submitting for reimbursement please keep in mind that the State fiscal year ends June 30, therefore, please remember to submit all claims for expenses incurred prior to June 30 separate from claims for reimbursement of expenses that occurred after July 1.**

Cost Estimate Non-Infrastructure	Amount Requested	Donated		Amount ITD Approved	
Personnel Costs (Coordinator hourly wage including benefits, travel, volunteer/intern stipends and all other anticipated personnel costs)*	\$	\$		\$	
Subtotal	\$	\$		\$	
Educational Materials					
Subtotal	\$	\$		\$	
Encouragement Incentives (Bike Helmets and other safety items can be included)					
Subtotal	\$	\$		\$	
Special Events (\$200 is the maximum allowed for refreshments per event). Sign-in sheets required for reimbursement.					
Subtotal	\$	\$		\$	
Indirect Costs (Must be accompanied by letter from the organization/agency's accountant explaining requested rate)					
Subtotal	\$	\$		\$	
					FEDERAL
		\$		\$	
This section to be completed by ITD: Total Allowed for Non-Infrastructure Project		\$			

This form becomes part of your contract with ITD. Any changes to the budget must be preapproved by submitting a Budget Itemization revision (ITD Form 0191). Cost overruns are the responsibility of project sponsor. * If a coordinator position is being requested or has been funded in the past it is essential that accomplishments and future project goals be explained in a letter submitted with the ISTOP/application.

SECTION 12: Engineering Strategies

Proposals requesting funds for infrastructure improvements (the 5th E – Engineering) must be accompanied by a strong Education and Encouragement non-infrastructure program (the 4 Es).

Engineering Strategies within 2 miles of schools: if applying for infrastructure funds (check all that apply)

- ☐ Conduct speed study to see if speed reduction is warranted
- ☐ Construct, replace, improve or repair sidewalks, signals, lighting, and pedestrian crossings
- ☐ Create on-street bicycle facilities (bike lanes, widened shoulders, etc.)
- ☐ Build off-street walking/bicycling paths
- ☐ Install street crossing improvements (crosswalks, curb extensions, median refuges, raised crossings, pedestrian bridges or tunnels)
- ☐ Install new or improved lighting for walkways or bikeways
- ☐ Install new or improved signage (school zone, speed limits, crosswalk)
- ☐ Install new or improved pavement markings and bike lanes
- ☐ Make existing walkways accessible to disabled students
- ☐ Install bicycle parking near schools (bike racks, bike lockers, covered shelters)
- ☐ Install traffic calming or speed reduction measures (curb extensions, speed humps, traffic circles, raised crosswalks, narrowing lanes, street closures)
- ☐ Install traffic control devices (traffic signals, pedestrian signals, flashing beacons)
- ☐ Design pick-up and drop-off procedures to increase safety and access
- ☐ Divert traffic away from school zone or designated routes
- ☐ Engineering strategies are not identified at this time for our community
- ☐ Other (fill in below)

Maintenance

Who will be responsible to maintain the infrastructure project (include snow removal, damage, etc.)?
Please submit a signed statement from the agency/organization with responsibility for maintenance.

Utilities

List all utility fees associated with this infrastructure project and who will be responsible for fees. If the project involves canals, utilities or railroads please attach evidence of support, copies of agreements, and details of who will pay for changes resulting from the project.

Project Design and Management

Who will design and manage the infrastructure project? Do you have in-house staff to perform the work? Do you plan to include outside construction project administration fees in your proposal? Please be complete with your answer.

SECTION 13: Infrastructure Funding Request

Cost Estimate for Infrastructure improvements: Local funds and in-kind donations are encouraged, but not required. Contingencies up to 5% for construction costs, and project administration fees paid to outside consultants only up to 10% of the total construction, must be included in the engineering estimate and cannot exceed the total infrastructure cap of \$100,000 per project. Only projects that meet the environmental requirements of a Categorical Exclusion shall be considered for SR2S program funding. Refer to the I-STOP Guidelines for the SR2S Advisory Committee's list of tips on success for infrastructure project proposals.

- Attach ITD Form 0190 SR2S Concept Report found in the Appendix
- Attach ITD Form 0164 Environmental Evaluation found in the Appendix
- The Concept Report must be signed by the ITD SR2S District contact
- The Environmental Evaluation must be signed by the ITD District Environmental Planner
- Construction project awards are reduced to reflect construction bids received and are no longer available to the Sponsor once funds are obligated
- Bid amounts over the award are the responsibility of the Sponsor

Infrastructure Cost Estimate (If quantity and unit price are not applicable, only fill in Cost.)	Quantity (Q)	Unit Price (UP)	Cost (Q x UP)	Value of Donated Items	ITD Use Only
1. Demolition/Removal of Existing					
2. Clearing/Grubbing					
3. Grading					
4. Drainage/Irrigation					
5. Permanent Signs or Displays					
6. Erosion/Pollution Control					
7. Utility/Sewer					
8. Pavement and Base					
9. Curb and Gutter					
10. Slope Protection					
11. Retaining Walls					
12. Pedestrian Crossing Signals and Illumination					
13. Striping					
14. Bicycle Storage Systems					
15. Footings/Foundations					
16. Electrical					
17. Barriers					
18. Concrete					
19. Contingencies 5% per project*					
19. Project Administration fees maximum 10%**					
20. Other (list)					
Totals (Maximum allowed \$100,000)					

Printed Name	Signature	Title

Cost overruns are the responsibility of the project sponsor. It is recommended that someone with construction experience complete this Cost Estimate. *Contingencies may be requested up to 5% of the total infrastructure project cost. **Construction project administration fees paid to outside consultants can be funded up to 10% of the total infrastructure project.

When submitting for reimbursement please keep in mind that the State fiscal year ends June 30, therefore, please remember to submit all claims for expenses incurred prior to June 30 separate from claims for reimbursement of expenses that occurred after July 1.

Before Turning in the Proposal Make Certain That

- ☐ The Cover Sheet with Title and contact information is completely filled out.
- ☐ The Contact Information Sheet is completely filled out.
- ☐ Sections 1 – 11 are complete if applying for only Non-Infrastructure funding.
- ☐ The entire **I-STOP** Worksheet is complete if applying for Infrastructure funding.
- ☐ The applicant has necessary staff to administer federal funding.
- ☐ The written answers are brief, clear and single-spaced. Documents, which are hard to read, may compromise committee review, and jeopardize your chance for funding.
- ☐ Any additional information attached must be referenced to the section being completed.
- ☐ The appropriate documents are attached (i.e. maps, photographs, endorsement, ITD 0164, ITD 0190, required letters and approval form, etc.).
- ☐ The **I-STOP and attachments** are stapled in the upper left hand corner.
- ☐ The proposals are received at ITD by 5:00 pm March 31st.
- ☐ Mail an original, 15 photocopies containing all application information to:

Jo O'Connor
Safe Routes to School Coordinator
Idaho Transportation Department
Annex Building
3293 Jordan Street
Boise ID 83703

joconnor@itd.idaho.gov

208-334-4475 Phone
208-334-8595 Fax